	Connecticut Department	of Public H	lealth	Dri	nking	Water	Sec	ction	
	Water Quality Mon	nitoring an	d Com	plia	ance S	Schedul	e		
PWS ID	PWS Name			_				er Type Pri	mary Source
СТ0290024	CAMP JEWELL-HIDEAWAY			I	NC	100		Р	GW
Local Address (where applicable)	Service	Resident	ial C	ommercia	al Industri	al C	Combined	Agricultura
73 MCCLAVE R	OAD	Connections			4				
Towns Served:	COLEBROOK					·			
	Mo	nitoring Requ	uiremer	nts					
Water System	Facility: DISTRIBUTION SYSTEM (W	SF ID: 00600)							
Total Colifor	m (3100)					1	rout	ine (RT) p	er quarter
Sampling	Point (Sampling Point ID)		Monitorin	ng Per	riod Co	ollection Pe	riod	Complia	nce Status
Select from	m Inventory of Active Sampling Points		10/1/18 -	12/31	/18			Cor	nplete
			1/1/19 -					Cor	nplete
ļ			4/1/19 -						
			7/1/19 -	9/30/	19				
	imeters (PPS)								er quarter
	Point (Sampling Point ID)		Monitorin			ollection Pe	riod		nce Status
Select from	m Inventory of Active Sampling Points		10/1/18 -		•				nplete
			1/1/19 -					Cor	nplete
			4/1/19 -						
		2001	7/1/19 -	9/30/	19				
•	Facility: ENTRY POINT (WSF ID: 007	700)						/5-	-\
	Nitrite (NOX) Point (Sampling Point ID)		Monitorin	a Dor	ind C	ollection Pe			「) per year Ince Status
			1/1/18 - 1			onection Per	iou		
ENTRY PO	1141 (3)		1/1/18 - 1						nplete nplete
			1/1/19 - 1					COI	iipiete
	Monthly Water System Fa	acility (WSF) I				Require	men	ts	
	<u> </u>		LCVCI IV	.0111	Corning	ricquii e			
Water System	Facility: ENTRY POINT (WSFID: 0070	101							

IVIO	ntniy water System Facility ((WSF) Leve	ei ivionitori	ng kequireme	nts
Water System Facility:	ENTRY POINT (WSFID: 00700)				
Analyte	Monitoring Requirement (Summary Ty	уре)	Operating Limi	t	Samples Req/Month
рН	Entry Point pH Monitoring (PHRD)		Minimum: 7.0	PH	4
Start Date: 4/1/2008		Compliance	History:	Operating Limit	Monitoring
		Monitoring F	Period	Compliance Status	: Compliance Status:
		11/1/2018 - 3	11/30/2018		N
		12/1/2018 - 3	12/31/2018		N
		1/1/2019 - 1/	/31/2019		N
		2/1/2019 - 2/	/28/2019		N
		3/1/2019 - 3/	/31/2019		
		4/1/2019 - 4/	/30/2019		

Otner	Compliance Schedules		
Compliance Schedule Activity	Due Date	Achieved Date	
CROSS CONNECTION EXEMPTION	3/1/2024		

	Wat	er System Facili	ty and Sampling P	oint Ir	nventoi	ry		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage ? DBPR
00600	DISTRIBUTION SYSTEM	4 DOWNSTREAM	DISTRIBUTION SYSTEM WITHIN 5 SERVICE CON	A A	Υ			

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name				Clas	sification	Population	Owner Type	Primary Source
CT0290024	CAMP JEWELL-HIDEAN	WAY				NC	100	Р	GW
Local Address (v	where applicable)		Service	Residen	ntial	Commercia	l Industri	al Combine	ed Agricultural
73 MCCLAVE RO	DAD		Connections			4			

Towns Served: COLEBROOK

	Wa	ter System Facili	ity and Sampling P	oint Ir	nvento	ry			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					_
23104	WELL	2	WELL	Α					_
48221	CALCITE FILTER								
56038	BOOSTER PUMP								

Contact Information

			_						
Name				Organization	1			Job Title	
Mr. Harold Sparrov	V			YMCA Great	er Hartford		Ceo		
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code
50 State House Sq.			2Nd Floor			Hartford CT 06103			06103
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Ad	ldress		
860-522-9622		860-522-2	1314			harold.sı	narold.sparrow@ghymca.org		
Contact Role(s): Le	gal Contact, (Owner	·						
Name				Organization	1			Job Title	
Mr. Norman T. But	ton li			Ghymca			Property N	lanager	
Mailing Address Lin	e One		Mailing Add	ress Line Two			City	State	Zip Code
6 Prock Hill Rd			P.O. Box 8			Colebroo	ok	СТ	06021
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Ad	ldress		
860-379-2782	217	860-379-8	8715		315-886-9199	norm.button@ghymca.org			

Please note the following:

Contact Role(s): Administrative Contact

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Schedule Generation Date: 4/11/2019

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0290044	COLEBROOK TOWN HALL COMPLEX				NC	25	L	GW
Local Address (where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
559 COLEBROO	K-WINSTED ROAD	Connections			1			

Towns Served: COLEBROOK

Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate (1040)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Nitrite (1041)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

Water System Facility and Sampling Point Inventory
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Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
20539	WELL	2	WELL	Α					

		- •
Contac	t Intor	mation

			,	contact iiii	Offication				
Name				Organization	l	Job Title			
Mr. Thomas D. McKeon				Town of Cole	Town of Colebrook			1	
Mailing Address Lin	e One		Mailing Ad	dress Line Two		City		State	Zip Code
562 Colebrook			P. O. Box 5			Colebro	ok	СТ	06021-0005
Business Phone Extension Fax				Mobile Phone	Emergency Phone	Email Ac	Email Address		
960 270 2250 202 960 270 7215					960 739 0950	TONANAC	NOEN SCOLEDD	OOKTO	WNIHALL ODG

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut	Depa	rtme	ent of	Public	Health	Dri	nking	g Water	Section	
	Wate	r Qual	lity N	Ionit	oring a	nd Con	nplia	nce S	Schedul	e	
PWS ID	PWS Name						Classif	ication	Population	Owner Type	Primary Source
CT0290044	COLEBROOK TOWN	HALL CO	MPLEX				N	IC	25	L	GW
Local Address (w	here applicable)				Service	Residen	tial Co	mmerci	ial Industri	al Combine	ed Agricultural
559 COLEBROOK	-WINSTED ROAD				Connection	IS		1			
Towns Served: C		JOO 313 1				000 130					
	Administrative Cor			act				1.5			
Name				Oı	rganization					Job Title	5
Colebrook											
Mailing Address	Line One		Mailing	Addres	s Line Two				City	State	Zip Code
							5 1	- "			
Business Phone	e Extension	Fax		Mobi	le Phone	Emergency	Pnone	Email	Address		
Contact Role(s):	Owner										

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Depar	tment o	f Public H	lealth	Dr	inking	Water S	Section	
	Water Quali	ty Moni	toring an	d Con	npli	iance S	Schedule		
PWS ID	PWS Name		<u> </u>		_				Primary Source
СТ0290054	COLEBROOK CONGREGATION	AL CHURCH				NC	25	Р	GW
Local Address (w	vhere applicable)		Service	Residen	tial	Commerci	al Industrial	Combine	d Agricultural
471 SMITH HILL	ROAD		Connections			1			
Towns Served: C	COLEBROOK								
		Monit	oring Requ	iireme	nts				
Water System	Facility: DISTRIBUTION SYS	STEM (WSF	ID: 00600)						
Total Coliform	n (3100) Point (Sampling Point ID)			Monitori	ina Da	eriod C	1 r Collection Perio	= :	per quarter
	Inventory of Active Sampling F	Points		10/1/18 -			Onection rem		Complete
Sciect iroin	inventory of Active Jumpling I	Onits		1/1/19 -		-			Complete
				4/1/19 -					- Inpiece
				7/1/19 -					
Physical Parar	meters (PPS)					<u>-</u>	1 r	outine (RT	per quarter
_	Point (Sampling Point ID)			Monitori	ing Pe	eriod C	ollection Perio	-	liance Status
Select from	Inventory of Active Sampling F	oints		10/1/18 -	- 12/3	31/18		C	Complete
				1/1/19 -				C	Complete
				4/1/19 -	-	•			
				7/1/19 -	9/30)/19			
	Facility: ENTRY POINT (W	SF ID: 00700)						
Nitrate And N									RT) per year
	Point (Sampling Point ID)			Monitori			Collection Perio		liance Status
ENTRY POIN	NT (3)			1/1/18 -					Complete
				1/1/19 -				C	Complete
		Other (`omnlianco	1/1/20 -					
		Other	Compliance					15 .	
Compliance School					Due L		Achieve	ed Date	
RESPOND TO SA		- 111		_	3/2/2				
			tification R	equire	eme				
			Compliance	Notice			<u>otification</u>		<u>rtification</u>
Violation/Situat	ion	A /	Period	Tier		Required	Performed		
E. Coli	344.1	-	1/18 - 6/30/18	3		3/29/2019		9/8/2019	
	Water Sys	stem Faci	lity and Sar	npling	POI				
Water Water	er System Facility So	amplina Poin	: Sampling Poi	nt			otal Lead a iform Coppe		Ctara
System Wate Facility ID	a system rucinty st	inipinig Politi ID	Description	nt.					Stage s WQP 2 DBPR
	RIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM		Status K A	Υ		4 - 22-11
			1 WITHIN 5 SER			Α			
		UPSTREAM	WITHIN 5 SER			Α			
00700 ENTR	Y POINT	3	ENTRY POINT			Α			
20540 WELL		2	WELL			Α			
		Coi	ntact Inform	mation)				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Colebrook Congregational Churc

Job Title

State

Zip Code

06021

Pastor

City

Colebrook

Organization

Mailing Address Line Two

Name

Pastor Steven P Blackburn

Mailing Address Line One

564 Colebrook Road

O.	Officetic	OOK CONGREGATIONAL CHURCH Policable) Service Residential Commercial Industrial Combined Agricultural Connections 1								
	Wa	ter Quality I	Monito	oring an	d Con	npl	liance S	Schedul	le	
PWS ID P	WS Name					Cla	ssification	Population	Owner Type	Primary Source
CT0290054 C	OLEBROOK CO	NGREGATIONAL CH	URCH				NC	25	Р	GW
Local Address (who	ere applicable)			Service	Residen	ntial	Commerci	al Industri	al Combin	ed Agricultural
471 SMITH HILL RO	DAD			Connections	ctions		1			
Towns Served: CO	LEBROOK							·	·	·
Business Phone	Extension	Fax	Mobile	e Phone E	mergency	/ Pho	one Email A	Address	•	

860-841-2325

Connecticut Department of Public Health Drinking Water Section

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

860-238-7633

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

steven.p.blackburn@hotmail.com

	dominocardat Bopar amon	c of f abite fi	Carti			, Tracer	Dection	
	Water Quality Mo	onitoring and	d Con	npl	liance S	Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
СТ0290144	NORBROOK FARM BREWERY				NC	87	Р	GW
Local Address	(where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combin	ed Agricultural
204 STILLMAN	HILL RD	Connections			1			
Towns Served:	COLEBROOK							

Connecticut Department of Public Health Drinking Water Section

Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Water System Facility	and Sampling Point In	ventory	

	Water System Facility and Sampling Point Inventory													
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR					
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ									
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α										
		UPSTREAM	WITHIN 5 SERVICE CON	Α										
00700	ENTRY POINT	3	ENTRY POINT	Α										
61284	WELL #1	2	WELL #1	Α										

			Co	ontact Inf	ormation				
Name				Organization	1	Job Title			
Mr. John Auclair				Positive Gro	und, LLC				
Mailing Address Lin	e One		Mailing Addr	ress Line Two			City	State	Zip Code
299 Stillman Hill Rd						Norfolk		СТ	06058
Business Phone Extension Fax			Mo	Mobile Phone Emergency Phone		Email Address			
860-488-2959					860-488-2959	jauclair@norbrookfarm.com			
	1				-1				

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

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End of schedule